

2011 Military Health System Conference

Exercise CAPITAL SHIELD

Towards Medical Response Integration in the National Capital
Region

The Quadruple Aim: Working Together, Achieving Success

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Joint Task Force National Capital Region
Medical

Purpose



- Provide an informational brief about the FY11 Exercise CAPITAL SHIELD
- This brief will provide:
 - Understanding of the exercise objectives
 - Overview of the exercise concept and execution
 - Lessons Learned
 - Way Ahead



Background (1/2)



- Since 2005, MD-DC-Northern VA evolving towards a unified, real-time medical common operating picture
- 2007: DEPSECDEF memo provided JTF the authority to develop Interagency partnerships
- CY09/10: JTF CapMed executed (12) DSCA missions with Fed/State/Local partners
- Before FY11: numerous hospital and health system MASCAL exercises but no NCR-level exercise

Background (2/2)



- JFHQ-NCR has sponsored an annual DSCA exercise:
 - exercise 4-5 days in length
 - training focused on Technical Rescue, First Responders, Point of Injury care
 - one incident site at Lorton Youth Detention Center, VA
 - admin medical support 4-5 days
- FY10, JTF CapMed inserted two-day MASCAL training (onsite only)

Commander's Intent (1/2)



- Improve provision of joint HSS to JFHQ-NCR
- Improve interoperability with Interagency entities
- Use exercise as test-bed for structure/tools:
 - Joint Critical Care ATLS Team: Modification of ATLS Team w/ attached triage and evac sections
 - Patient Evac Vehicle: Used as a mobile trauma stabilization/ treatment platform in the field

Commander's Intent (2/2)



FY11 Exercise Objectives



- FY11, JTF CapMed expanded trng objectives:
 - expand to two separate MASCAL sites
 - transport patients to CIV and MIL MTFs
 - employ air, ground, and water-borne patient transport
 - share regional patient tracking in real-time



FY11 Exercise Scenario



- Multi-faceted terrorist strikes with a “coincidental” airliner crash
 - strike at “Capital Ritz” during POTUS-sponsored dinner for foreign dignitaries (Radiological release detection)
 - strike at “Dallas Center” during a music concert
 - multiple small-scale explosions at National Mall
 - airliner crash at Pentagon parking lot
- Several collapsed structures, overwhelming casualties, confusion and chaos

Exercise Participant Growth



■ FY10

- (8) DoD medical organizations
- (197) DoD role-playing casualties

■ FY11

- (8) DoD medical organizations
- (3) CIV hospital associations or alliances
- (30) CIV hospitals (MD-VA-DC)
- (2) County Health Depts
- (5) County/ District EMS
- (105) DoD role-playing casualties
- (403) CIV role-playing casualties
- American Red Cross
- Maryland Institute of



FY11 Exercise Participants



Maryland UASI Expansion Grant Hospitals - NCR

Suburban Hospital Holy Cross Hospital Fort Washington Medical Center
Doctors Community Hospital Laurel Regional Hospital Washington Adventist Hospital
Prince George's Regional Hospital Montgomery General Hospital Southern Maryland
Hospital Center
Shady Grove Adventist Hospital

Northern Virginia Hospital Alliance

Fauquier Hospital Virginia Hospital Center Mary Washington Hospital
Inova Alexandria Hospital Stafford Hospital Center Sentara Potomac Hospital
Inova Fair Oaks Hospital Reston Hospital Center Prince William Hospital
Inova Loudoun Hospital Inova Fairfax Hospital Inova Mount Vernon Hospital

District of Columbia Hospital Association

Georgetown University Hospital Providence Hospital Washington Hospital Center
Children's National Medical Center Howard University Hospital United Medical Center
George Washington University Hospital Sibley Memorial Hospital

American Red Cross Maryland Institute of Emergency Medical Support System
Montgomery County Police Department Montgomery County Office of Emergency
Management

Montgomery County Department of Health Montgomery County EMS
Prince George's County EMS Prince George's County Department of Health

JTF CapMed Walter Reed Army Medical Center

79th Medical Wing National Naval Medical Center

779th Medical Group National Institutes of Health Clinical Center

579th Medical Group National Library of Medicine

Malcolm Grow Medical Center Uniformed Services University of the Health Sciences

DeWitt Army Community Hospital DC VA Medical Center / Medical Emergency Radiological
Response Team

DC/EMHS Conference USCG Auxiliary / DC Flotilla

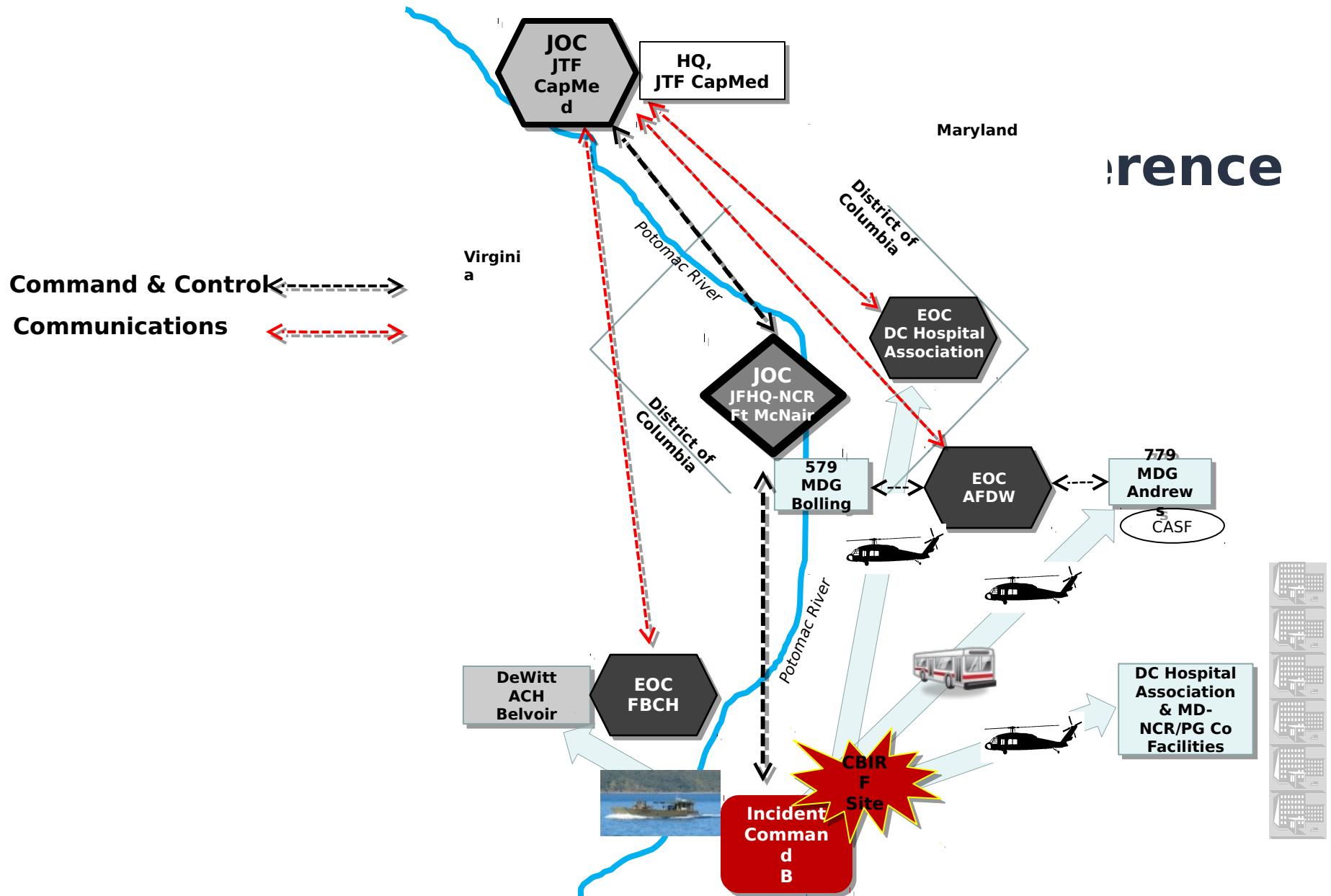
1st Helicopter Squadron, 316th Wing Headquarters & Service Battalion, MCB Quantico



Day 1 - Stump Neck, MD Site



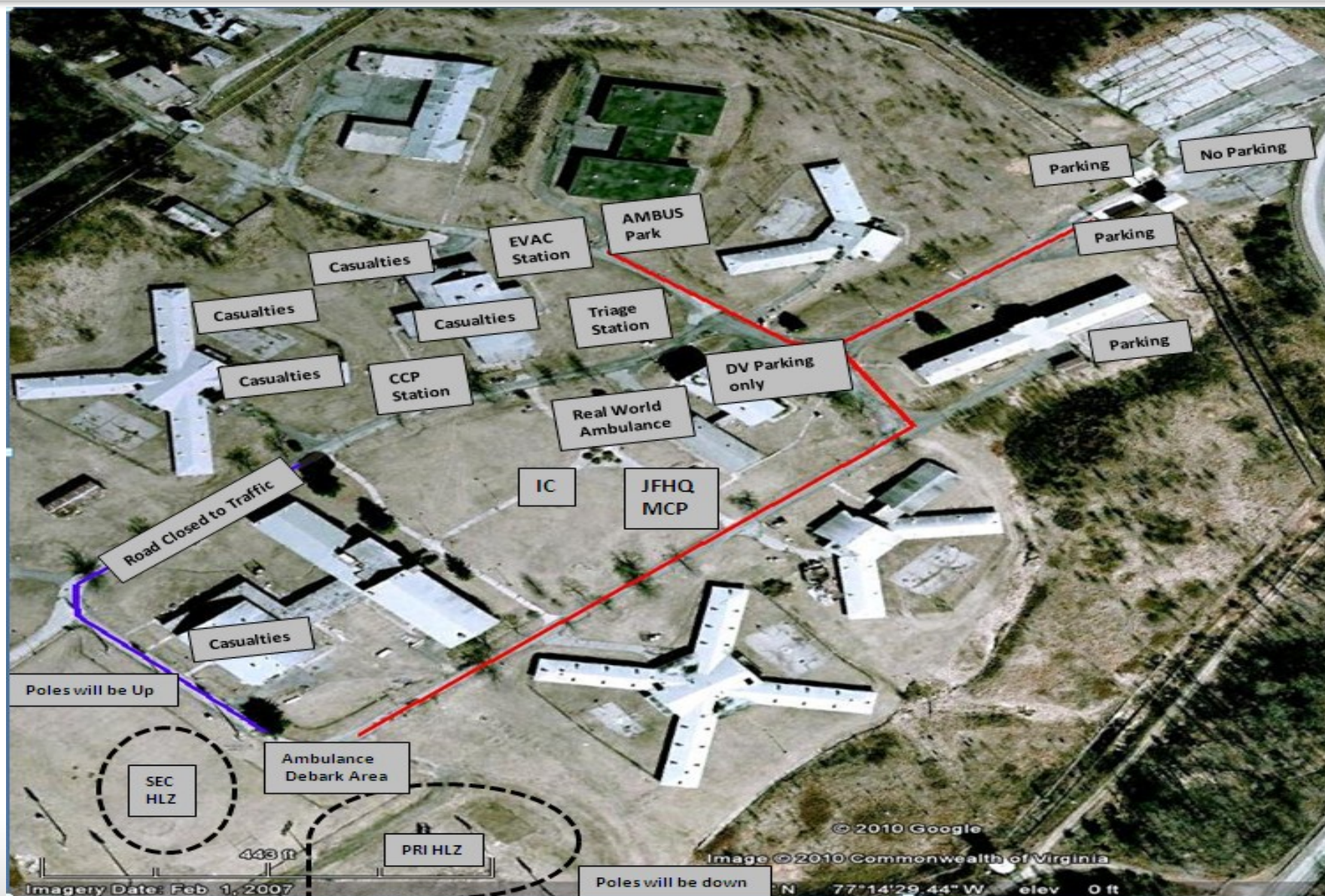
Day 1 - Medical Exercise Expansion



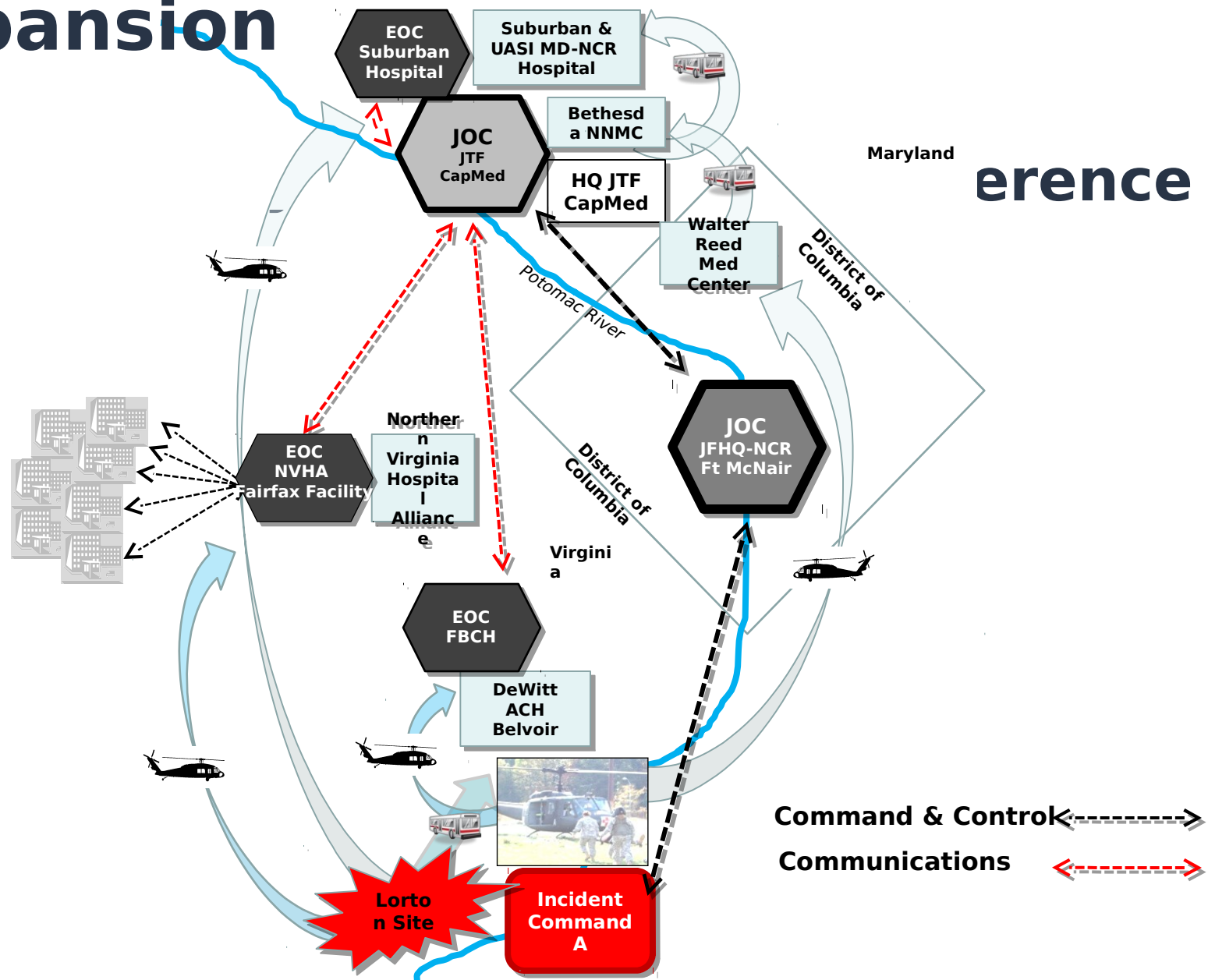
Media



Day 2 - Lorton, VA Site



Day 2 - Medical Exercise Expansion



Lessons Learned (1/4)



Lessons Learned (2/4)



- Positive Results:
 - Strong NCR civilian hospital interest/participation
 - Provided realistic venue to field-test tools and concepts:
 - JCATS
 - WRAMC Patient Evac Vehicle (PEV)
 - USCG maritime evacuation
 - HC Standard®
 - Joint agility and flexibility (49 grnd transports despite Wx effects to rotary-wing aircraft)

Lessons Learned (3/4)



- Areas for Improvement:
 - Movement from ad-hoc team formation to formally organized teams and crews
 - Joint medical interoperability (e.g., equipment, training methods, communications)
 - Medical Logistics planning when operating w/civilian first responders and transport platforms
 - Understanding of NIMS, IC and C2 in DSCA
 - Communications interoperability w/ Interagency partners in the NCR

Lessons Learned (4/4)



- Areas for Improvement:
 - Expansion of available training areas w/in the NCR (e.g. Stump Neck restrictions)



The Way Ahead



- JTF CapMed committed to developing joint medical and DSCA interoperability training opportunities
- Must determine scale and scope of future exercises assuming resource challenges
- Deconflict FY12 exercise program with BRAC Transition schedule
- Implement plan to join the NCR medical common operating picture integration effort



Questions and Comments





Back-Up Slides

JTF CapMed Participation



Walter Reed Army Medical Center (-) (OPCON)

- (1) PEV (Stump Neck), 13 Oct
- (1) PEV (Lorton), 14 Oct
- Joint Critical Care ATLS Teams (JCATS) (Lorton), 14 Oct
- (1) AMBUS (Lorton), 14 Oct
- (1) BLS Ambulance (Lorton), 14 Oct
- (15) MASCAL Role Players (Lorton), 14 Oct
- Casualty Receiving Facility, 14 Oct

DeWitt Army Community Hospital (-) (OPCON)

- (2) Medical Evaluators (Lorton), 13 Oct
- Casualty Receiving Facility, 13 Oct (via USCG Aux/DC Flotilla)
- (16) MASCAL Role Players (Stump Neck), 13 Oct
- CBRNE MASCAL Receiving Facility, 14 Oct
- (10) MASCAL Role Players (Lorton), 14 Oct
- (1) BLS Ambulance (Lorton), 15 Oct

National Naval Med Center Bethesda (-) (OPCON)

- (1) BLS Ambulance (Lorton), 13 Oct
- Conduct CMAX2010 with BHEPP, 14 Oct
- Support BHEPP MASCAL casualty transfer, 14 Oct
- MASCAL Receiving Facility, 14 Oct
- (10) MASCAL Role Players (Lorton), 14 Oct
- (40) MASCAL Role Players (USUHS), 14 Oct

79th Medical Wing/Malcolm Grow Med Center (-) (TACON)

- JCATS (Stump Neck), 13 Oct
- CBRNE MASCAL Receiving Facility (Malcolm Grow), 13 Oct
- (50) MASCAL Role Players (Stump Neck), 13 Oct
- (1) BLS Ambulance (Stump Neck), 13 Oct
- (2) AMBUS (Stump Neck), 13 Oct

* To those MTFs OPCON to JTF CapMed
2011 MHS Conference